Assassination Records Review Board Final Determination Notification

AGENCY : HSCA

RECORD NUMBER: 180-10060-10477

RECORD SERIES : STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

Released under the John F Kennedy Assassination Records Collection Act of 1992 (44 USC 2107 Note). Case#:NW 68261 Date: 199.01.2022

December 8, 1995

Status of Document: Postponed in Part

Number of releases of previously postponed information: 11

Reason for Board Action: The Review Board's decision was premised on several factors including: (a) the significant historical interest in the document in question; (b) the absence of evidence that the release of the information would cause harm to the United States or to any individual.

Number of Postponements: 5

Postponements: All the postponements in this document represent Social Security numbers.

Reason for Board Action: The text is redacted because the public disclosure of the redaction could reasonably be expected to constitute an unwarranted invasion of personal privacy, and that invasion of privacy would be so substantial that it outweighs the public interest.

Substitute Language: SSN

Date of Next Review: 2017

Board Review Completed: 10/24/95

Date: 08/20/93

Page:1

JFK ASSASSINATION SYSTEM

IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : HSCA

RECORD NUMBER: 180-10060-10477

RECORDS SERIES : STAFF PAYROLL RECORDS

AGENCY FILE NUMBER:

DOCUMENT INFORMATION

ORIGINATOR : HSCA

FROM :

TO:

TITLE:

DATE: 08/03/77

PAGES: 10

SUBJECTS:

HSCA, ADMINISTRATION

MATHEWS, I. CHARLES

DOCUMENT TYPE : PRINTED FORM

CLASSIFICATION: U

RESTRICTIONS : 3

CURRENT STATUS: P

DATE OF LAST REVIEW: 06/04/93

OPENING CRITERIA:

COMMENTS:

Box 2.

13. Signature of Employer:	14. Title of Employer:	15. Date:
Thomas Howarth	Deputy Staff Director and Budget Officer	1/17/79
- Vinnes it course	and budget officer	

749-159-000

Realiar Temporary.

Other Income & Regular

12. REMARKS:

☐ Temporary

RETURN DIRECTLY TO LENDER

10E. Reason for leaving:

Committee terminated

Pro-Pay

Overseas

or Combat

Select Committee on Assassinations U.S. House of Representatives WASHINGTON, D.C. 20515

Isiah Charles Mathews

JFK Act 5 (g)(2)(D)

PAYROLL AUTHORIZATION FORM (Please Use Typewriter U.S. HOUSE OF REF	PRESENTATIVES (Any erasures, corrections, or changes
or Ballpoint Pen) Washington, D.	· · · · · · · · · · · · · · · · · · ·
To the Clerk of the House of Representatives:	
I hereby authorize the following payroll action:	
Employee Name (First-Middle-Last)	Effective Date
I. Charles Mathews	12/31/78
Employee Social Security Number	Type of Action
JFK Act 5 (g)(2)(D)	☐ Appointment ☐ Salary Adjustment
Employing Office or Committee/Subcommittee	☐ Title Change
A P P	Termination (At close of business on effective date)
Assassinations	Leave without pay (Beginning with effective date above and ending
	close of business
(If type of action is an Appointment, Salary Adjustment, or Title Ch	ange, complete appropriate information below.)
Position Title	Gross Annual Salary*
* If employee is a civil service annuitant (includes U.S. House of Representatives), the	gross annual salary shown should include the annuity received by the employe
plus the salary received from the employing office. If Committee Employee, complete appropriate item below.)	
	I
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profession	
	Select Committee: Authority—H. Res. 956_of 95th Congress.
3. Joint Committee.	
If Employee of an Officer of the House, complete item below.)	
Position NumberIf applicable, Level_	Step
I certify that this authorization is not in violation relatives.	of 5 U.S.C. 3110(b), prohibiting the employment of
Date19	
лие, ТУ	(Signature of Authorizing Official) LOUIS STOKES
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	
	(Type or print name of Authorizing Official)
(Type or print name and title of above official)	(Title – If Member, District and State)
All appointments and salary adjustments for employees un ployees, except those of the Committee on Appropriations, the Coe approved by the Committee on House Administration.	
APPROVED:	
/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Chairman, Committee on House Administration
Office of Finance use only:	ID
Office Code	· · · · · · · · · · · · · · · · · · ·

Copy for Initiating Office or Committee

Monthly Annuity \$_____ of ____

(Revised: August 1, 1977)

PAYROLL AUTHORIZATION FORM

or Ballpoint Pen)

(Please Use Typewriter U.S. HOUSE OF REPRESENTATIVES Washington, D.C. 20515

(Any erasures, corrections, or changes on this form must be initialed by the authorizing official.)

To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

		Effective Date			
I. Charles Mathews	NE WE	March 1, 1973			
Employee Social Security Number		Type of Action			
JFK Act 5 (g)(2)(D)		□ Appointment			
Employing Office or Committee/Subcommittee		□ Salary Adjustment □ Title Change			
Assassinations	☐ Termination (At close of business on effective date) ☐ Leave without pay (Beginning with effective date above close of business				
(If type of action is an Appointment, Salary Adjustment, or Title ©	hange, comp	ete appropriate information below.)			
Position Title	<u> </u>	Gross Annual Salary*			
special Counsel		\$30,000			
* If employee is a civil service annuitant (includes U.S. House of Representatives), th	e gross annual s				
plus the salary received from the employing office. (If Committee Employee, complete appropriate item below.)					
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profess	sional + +				
2. 図 Special (Investigative staff of Standing Committee) or		-14 4-4-14-14-14-0-956 (954-5			
3. ☐ Joint Committee.	r Select Comr	Titree: Authority—H. Res. 2222 of 2222 Congress			
(If Employee of an Officer of the House, complete item below.)					
Position NumberIf applicable, Level_	Ste	P			
elatives.	n of 5 U.S	.C. 3110(b), prohibiting the employment o			
relatives.	n of 5 U.S	S.C. 3110(b), prohibiting the employment of (Signature of Authorizing Official)			
relatives. Date <u>March_14</u> , 19_78.	louis s	(Signature of Authorizing Official) (Type or print name of Authorizing Official)			
Tocertify that this authorization is not in violation relatives. Date		(Type or print name of Authorizing Official)			
Date	LOUIS S Chairms	(Signature of Authorizing Official) (Type or print name of Authorizing Official) (Title—If Member, District and State) Duse Classification Act and for Committee em-			
Date	Chairma under the Ho Committee o	(Signature of Authorizing Official) (Type or print name of Authorizing Official) (Title—If Member, District and State) Duse Classification Act and for Committee emonthe Budget, and the Joint Committees, must			
Date	Chairma under the Ho Committee o	(Signature of Authorizing Official) (Type or print name of Authorizing Official) (Title-If Member, District and State) Ouse Classification Act and for Committee emonthe Budget, and the Joint Committees, must			
Date	Chairma under the Ho Committee o	(Signature of Authorizing Official) (Type or print name of Authorizing Official) (Title—If Member, District and State) Ouse Classification Act and for Committee emon the Budget, and the Joint Committees, must airman, Committee on House Administration			
Date	Chairma under the Ho Committee o	(Signature of Authorizing Official) (Type or print name of Authorizing Official) (Title-If Member, District and State) Duse Classification Act and for Committee emon the Budget, and the Joint Committees, must airman, Committee on House Administration			
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Docld:32239485 Page 6

PAYROLL AUTHORIZATION FORM

(Please Use Typewriter or Ballpoint Pen)

U.S. HOUSE OF REPRESENTATIVES Washington, D.C. 20515

(Any erasures, corrections, or changes on this form must be initialed by the authorizing official.)

To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

Employee Name /First 84:44:4 1 - 4				
Employee Name (First-Middle-Last)		Effectiv	ve Date	
I. Charles Mathews	10,	/1/77	and the state of t	
Employee Social Security Number	No. 1	Type of	Action	
JFK Act 5 (g)(2)(D)	☐ Appoi	ntment		
Employing Office or Committee	- 🖪 Salary	· Adjustment		
Assassinations	☐ Termin	nation (At close of bus	iness on effective	e date)
(If type of action is an Appointment or Salary Adjustment, comp	olete the foll	owing information	.)	
Position Title		Gross	Annual Salary	· · · · · · · · · · · · · · · · · · ·
Special Counsel		\$26,000		,
If Committee Employee, complete appropriate item below.)				
1. Standing Committee: Staff—Clerical or Profes	ssional.			
2. 🕼 Special or Select Committee: Authority—H. Res4	65 of 95	in Congress:		
,,		g		
2 🗀 . : . 6				
3. Joint Committee.			·	
	Step			
If Employee of an Officer of the House, complete item below.) Position Number	·	<u></u>		
(If Employee of an Officer of the House, complete item below.) Position Number	·	<u></u>	piting the em	iployment o
(If Employee of an Officer of the House, complete item below.) Position Number	·	<u></u>	oiting the em	iployment o
Position NumberIf applicable, Level I certify that this authorization is not in violation relatives. DateOctober 14, 1977	·	C. 3110(b), prohik		iployment o
If Employee of an Officer of the House, complete item below.) Position Number	of 5 U.S.O	C. 3110(b), prohik	g Official)	ployment o
Position NumberIf applicable, Level I certify that this authorization is not in violation relatives. DateOctober 14, 1977	of 5 U.S.o	C. 3110(b), prohik (Signature of Authorizin	g Official)	iployment c
(If Employee of an Officer of the House, complete item below.) Position Number	of 5 U.S.C.	(Signature of Authorizing) (Type or print name of Authorizing) (Title-If Member, Districtors Authorizing) (Title-If Member, Districtors Authorizing)	g Official) rizing Official) t and State) ct and for Coinhe Joint Comm	mmittee em-
Position Number	of 5 U.S.C.	C. 3110(b), prohik (Signature of Authorizin (Type or print name of Authorizin (Title—If Member, Districuse Classification A	g Official) rizing Official) t and State) ct and for Coinhe Joint Comm	mmittee em-
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Copy for Initiating Office or Committee

To the Clerk of the Ho	ise of Representatives:	, , , , , , , , , , , , , , , , , , ,			-
I hereby authorize the	following payroll action:				
- Employee	Name (First-Middle-Last)	:	Effe	ctive Date	
I. Ci	arles Mathaws	•	9/3/77	. .	
Employe	Social Security Number	7.9	Туре	e of Action	
JFK Act	5 (g)(2)(D)	Žŧ.	Appointment		
Employi	ng Office or Committee	•	Salary Adjustment		• • •
Assas	sinations		Termination (At close of	business on effective	e date)
type of action is an Ap	pointment or Salary Adjust	ment, complete th	ne following informat	ion.)	
(3/2)	Position Title		Gr	oss Annual Salary	
Speci	al Comsel		\$19,500		· · · · · · · · · · · · · · · · · · ·
2. Special or Se3. Joint Commi	omplete appropriate item- nmittee: Staff— Clerical of lect Committee: Authority— ttee. of the House, complete ite	or ☐ Professional H. Res. <u>4€5</u>			, <u> </u>
2. Special or Se 3. Joint Commi Femployee of an Officer Position Number I certify that this	nmittee: Staff— Clerical of Cl	Professional H. Res. 455 em below.) ole, Level	ofCongress. _`Step	ohibiting the em	ployment
2. Special or Se 3. Special or Se f Employee of an Officer Position Number I certify that this elatives.	nmittee: Staff— Clerical of lect Committee: Authority— Itee. of the House, complete ite authorization is not in	Professional H. Res. 45 em below.) ole, Level violation of 5	ofCongress. Step U.S.C. 3110(b), pro	ohibiting the em	nployment
2. Special or Se 3. Joint Commi F Employee of an Officer Position Number I certify that this elatives.	nmittee: Staff— Clerical of lect Committee: Authority— Itee. of the House, complete ite	Professional H. Res. 65 em below.) ole, Level violation of 5	ofCongress. Step U.S.C. 3110(b), pro		ployment
2. Special or Se 3. Joint Commi Employee of an Officer Position Number_ I certify that this elatives.	nmittee: Staff— Clerical of lect Committee: Authority— Itee. of the House, complete ite authorization is not in	Professional H. Res. 455 em below.) ole, Level violation of 5	OfCongress. Step U.S.C. 3110(b), pro (Signature of Author) (Type or print name of Author)	prizing Official)	ployment
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2. Special or Se 3. Joint Commi Employee of an Officer Position Number I certify that this elatives. ate All appointments are oyees, except those of the approved by the Commission.	Inmittee: Staff— Clerical of lect Committee: Authority— Itee. of the House, complete ite authorization is not in authorization is not in August 3 , 1977 ad salary adjustments for emple Committee on Appropriation in Appropriation House Administration APPR	Professional H. Res. 45 em below.) ole, Level violation of 5 Chairs apployees under the tions, the Commit	StepCongress. U.S.C. 3110(b), pro (Signature of Author) (Type or print name of Author) (Title-If Member, Date House Classification)	Authorizing Official) District and State) Act and for Contact the Joint Comm	mmittee em
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NW 68261 Docld:32239485 Page 8

MGIC

they party.

Docld:32239485 Page 9

NW 68261

49 School St.

Mortgage Guaranty Insurance Corporation

a subsidiary of MGIC Investment Corporation

Telephone 414/347-6500

Request for Verification of Employment

1.ENDER – Complete Items 1 thru 7. Have applicant complete Item 8. Forward directly to employer named in Item 1. EMPLOYER – Please complete Items 9 thru 16 and return directly to lender named in Item 2.

	PART I — F	REQUEST			
1. To (Name and address of employer)	2. From (Name and address of lender)				
Select House Committee On Assassinat 369 House Annex #2 ashington, D.C. 20515	1st American Bank for Savings 572 Columbia Road Dorchester, Mass. 02125				
3. Signature of Lender	4. Title Mortgage Off	ficer		5. Date	6. Lender's I.D. Number (Optional)
wave applied for a mortgage loan and stated that I am now	or was formerly emp	oloyed by you	. My signatur	e below authorizes	verification of this information
Isiah C. Mathews 4827 S. 8th Rd.	Arlington,	Va.	8. Signature	a of Applicant O	Nathan
	PART II — VEI	RIFICATIO	V		
EMPLOYMENT DATA			PAY	DATA	
9A. Is Applicant Now Employed By You? YES NO (If "No," complete Items 9c and 9d.) 9B. How Long Has Applicant Been Employed By You?	· · · · · · · · · · · · · · · · · · ·	#30.0	HOURLY	12C. To Be Comp Personnel O Pay Grade	
(If Military, enter total service)	\$	The state of the s	(Specify)		
8-3-77		gs Last 12 Mo		Type	Monthly Amount
9C. Date Applicant Left Attlemployed	Type	Amo	ount	Base Pay	
9D. Reason For Leaving	Base Pay	\$ 28,6	66	Rations	\$
	Overtime	P • • • • • • • • • • • • • • • • • • •		Flight or Hazard	\$
70 Present Position •	Overtime	\$	—	Clothing	\$
Special Counsel	Commissions	_		Quarters	\$
Probability of Continued Employment		\$		Pro Pay	\$
Jes	Bonus	\$		Overseas Or Combat	\$
The above information Signature of Employer Hromas Howall	15. Title	confidence in		7 4 5	16. Date 10 -31-78
information on this form is Confidential. It is to be	transmitted directly	to the lebder	$-\mathcal{U}\mathcal{U}$ r without na	ossing through the	hands of the applicant or an

MEMORANDUM

To: Thomas Howarth, Budget Officer

From: G. Robert Blakey, Chief Counsel and Staff Director

Date: October 14, 1977

Re: Salary Adjustments

This is your authorization to increase the salaries of the below listed employees to the amounts indicated effective October 1, 1977:

Michael C. Eberhardt	\$34,000
Marjorie A. Eagle	14,500
I. Charles Mathews	26,000

MEMORANDUM

TO: ALL STAFF

RE: Payroll Certification

The Regulations and Accounting Procedures for Allowances and Expenses of Committees, Members and Employees of the U.S. House of Representatives require that, among other things, the Committee's monthly payroll certification include the relationship, if any, of each employee to any current Member of Congress. This certification is signed monthly by our Chairman.

The following are the relationships to be included in the certification:

father
mother
son
daughter
brother
sister
uncle
aunt
first cousin

nephew
niece
husband
wife
father-in-law
mother-in-law
son-in-law
daughter-in-law

brother-in-law sister-in-law stepfather stepmother stepbrother stepsister half-brother half-sister

Please complete the appropriate portion below, sign and date this form, which will then become a part of your permanent personnel file. If this status changes, you must notify the Committee's Pudget Office immediately of the change.

W	I am n	ot rela	ated	to any c	urrent	(95th (Congress)	Member	r of (Congr	ess.
	I am r (Pleas	elated e speci	to a ify.)	current	: (95th	Congres	ss) Member	of Co	ongre:	ss.	

Signature of Employee

Aug. 3, 1977

June 29, 1977

Mr. Isiah C. Mathews 21 Pearl Street Danbury, Connecticut 06810

Dear Mr. Mathews:

Mr. Blakey asked that I send you the enclosed forms to be completed by you prior to your employment with the Select Committee on Assassinations. Instructions have been attached to the forms, and if you have any questions please do not hesitate to contact me.

We look forward to meeting you.

Very truly yours,

Elizabeth Berning Administrative Assistant to G. Robert Blakey

EB Enclosures Isiah C. Mathews

21 Pearl Street
Danbury, Connecticut 06810

Will begin work around end of July or 1st of August \$19,500 subject to subsequent judgment
Will be Special Assistant to Blakey

Please send all forms, etc. needed to begin employment and obtain security clearance.